STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

I. Name of Lobbyist(s) _Chi	ristine Alibrandi		APR 2 1 201/
II. Name of lobbyist's partnership, firm or corporation, if any:			NEW HAMPSHIRE DEPARTMENT OF STATE
(Name of par	tnership, firm or corporation)		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
()(Telephone)	()	e-mail	
reportable expense transacti	ions which are not attributable	orts for each client, OR you ma to any one client).	
New Futures, Inc	coccurring in the months prior to	o the reporting date relative to the	e following client:
	Name of Client as it appears on the L	obbyist Registration Form)	
All reportable transactions unrelated to any particular clie	• •	bbyist's family), or the lobbying	firm listed below which are
• •	26, 2017 date of registration to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/17	
	ber 25, 2017 from 7/1/17 to 9/30/17	January 31, 2018 \Box activity from 10/1/17 to 12/31/	717
		le transactions made since the the Secretary of State's Office, St	
VI Check if additional repo			
If you have received fees	or made expenditures, you must	file Addendum A- Fees and Ex	penses
☐ If you have paid an honor Expense Reimbursement	arium or reimbursed expenses, y	ou must file Addendum B – Rep	port of Honorariums or
☐ If you, your firm, or your	family has made political contril	butions, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation I have read RSA 15, RSA 15- and complete to the best of my (Signature of lobbyid)	B, RSA 14-C and RSA 664 and	hereby swear or affirm that the fo	oregoing information is true
		(2	•
(Print Name of Johnvist)			

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Christine Alibrandi	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
III. Name of Client New Futures, Inc.	Date 4/14/17
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The granded by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a)\$ 1390.34
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$
c) Total of all fees received to date (Add lines a and b)	c)\$ 1390,34 d)\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made to may be filed for the lobbyist(s)/firre aggregate total of all expenses parxpenses; (b) the aggregate total of alle: meals purchased during a business than \$10 that is given to the personal with a value of \$25.00 or less); are orting period of greater than \$25.00 for use of greater than \$25, purchase of the er than \$25, but not greater than \$5, expense reimbursement, or politic
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI	262

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	n\$ 16.98
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
(hA 4 hL)	4.14.17 (Date)
(Signature of lobbyist)	(Date)
Christine Alibrandi (Print Name of lobbyist)	

April 20, 2017

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APR 2 1 2017

Secretary of State's Office – Elections Division – Administration State House, Room 204 107 North Main Street Concord, NH 03301

NEW HAMPSHIRE DEPARTMENT OF STATE

RE: Termination of Lobbying Registration for New Futures, Inc.

I am writing to inform you I am no longer lobbying on behalf of New Futures, Inc. This is the final lobbying report I will be submitting on behalf of New Futures, Inc.

If you have any further questions, you may contact me at (603) 661-3035.

Thank you.

Sincerely,

Christine Alibrandi

Former Children's Behavioral Health Collaborative Director for New Futures, Inc.